

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

McKinley for Congress

ADDRESS (number and street)

PO Box 642

Check if different  
than previously  
reported. (ACC)

Morgantown

WV

26507

2. **FEC IDENTIFICATION NUMBER** ▼

C

C00473132

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

WV

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2016

through

M M / D D / Y Y Y Y

03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Samuel Stone

Signature of Treasurer

Samuel Stone

[Electronically Filed]

Date

M M / D D / Y Y Y Y

03 / 31 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

McKinley for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	150995.51	650564.04
(b) Total Contribution Refunds (from Line 20(d)) .....	400.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	150595.51	650164.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	62407.84	385709.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	62407.84	385709.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	654399.12	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	415000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**McKinley for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

31195.00

194645.00

(ii) Unitemized.....

2800.51

6152.03

(iii) TOTAL of contributions from individuals ▶

33995.51

200797.03

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

117000.00

449767.01

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

150995.51

650564.04

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

150995.51

650564.04

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 59

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62407.84	385709.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	400.00	400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	400.00	400.00
21. OTHER DISBURSEMENTS .....	36000.00	117000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	98807.84	503109.67

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	602211.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	150995.51
25. SUBTOTAL (add Line 23 and Line 24).....	753206.96
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	98807.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	654399.12

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. GLENN T. ADRIAN****A.** Mailing Address 1015 LUCAS DRIVE

City	State	Zip Code
MORGANTOWN	WV	26505-8040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
COMMERCIAL DEVELOPER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8957

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**B. RYAN ADRIAN**

Mailing Address 1000 LUCAS DR

City	State	Zip Code
MORGANTOWN	WV	26505-8041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8964

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM MARTY BECKER**

Mailing Address 232 LOCHA DRIVE

City	State	Zip Code
JUPITER	FL	33458-7733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAX CAPITAL GROUP

Occupation

INSURANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11.8936

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**DR. GREG BORAH**

Mailing Address 4020 GREYSTONE DR

City

MORGANTOWN

State

WV

Zip Code

26508-8680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WVU

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		03		2016

Transaction ID : SA11.8890

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. EDWARD PATRICK BOYLE II**

Mailing Address RT 26 S

City

KINGWOOD

State

WV

Zip Code

26537-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRESTON CONTRACTORS GROUPS

Occupation

VP- FINANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8952

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. EDWARD PATRICK BOYLE II**

Mailing Address RT 26 S

City

KINGWOOD

State

WV

Zip Code

26537-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRESTON CONTRACTORS GROUPS

Occupation

VP- FINANCE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8953

Amount of Each Receipt this Period

2400.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN P. BOYLE II**

Mailing Address 15 WATERSIDE DRIVE

City State Zip Code  
MORGANTOWN WV 26508-2997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTON CONTRACTORSOccupation  
PRESIDENT & CEO

Receipt For: 2016

☐ Primary ☒ General

☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8949

Amount of Each Receipt this Period

2300.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN P. BOYLE II**

Mailing Address 15 WATERSIDE DRIVE

City State Zip Code  
MORGANTOWN WV 26508-2997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTON CONTRACTORSOccupation  
PRESIDENT & CEO

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9028

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

REFUNDED \$200.00 ON 03/31/2016

**C.** Full Name (Last, First, Middle Initial)  
**MR. RYAN P. BOYLE**

Mailing Address PO BOX 606

City State Zip Code  
KINGWOOD WV 26537-0606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTON CONTRACTORS GROUPSOccupation  
EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General

☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8951

Amount of Each Receipt this Period

2300.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. RYAN P. BOYLE**

Mailing Address PO BOX 606

City

KINGWOOD

State

WV

Zip Code

26537-0606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRESTON CONTRACTORS GROUPS

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9029

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

REFUNDED \$200.00 ON 03/31/2016

Full Name (Last, First, Middle Initial)

**MRS. SARAH E. BOYLE**

Mailing Address 268 ORCHARD XING

City

MORGANTOWN

State

WV

Zip Code

26505-1728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8961

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. TYLER M. BOYLE**

Mailing Address 12 GREENTREE DR.

City

MORGANTOWN

State

WV

Zip Code

26508-8635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8962

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00
---------



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. WILLIAM G. BOYLE**

Mailing Address 217 SEEMONT DRIVE

City

KINGWOOD

State

WV

Zip Code

26537-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH COAL

Occupation

VP- METALLURGICAL SALE

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8956

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. DAVID CLOVIS**

Mailing Address 304 EMERSON RD.

City

CLARKSBURG

State

WV

Zip Code

26301-9724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8997

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MIKE CLOWSER**

Mailing Address 42 QUARRY RIDGE

City

CHARLESTON

State

WV

Zip Code

25304-1051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8958

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. THOMAS J. DEWITT**

Mailing Address 457 LAKEVIEW DR

City

MORGANTOWN

State

WV

Zip Code

26508-9295

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8959

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**VIRGINIA DULANY**

Mailing Address 8 WILLIAMSBURG CIRCLE

City

WHEELING

State

WV

Zip Code

26003-5570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2016

Transaction ID : SA11.8903

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ROBERT R. FORMAN**

Mailing Address 211 GOSS ROAD

City

BRUCETON MILLS

State

WV

Zip Code

26525-5613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRESTON CONTRACTORS GROUPS

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8954

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**F. T. GRAFF JR.**

Mailing Address 108 GRAFF LN

City	State	Zip Code
CHARLESTON	WV	25304-1065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8934

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**PATRICK C. GRANEY III**

Mailing Address 412 TENNESSEE AVE

City	State	Zip Code
CHARLESTON	WV	25302-2338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8933

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**MR. BENNETT K. HATFIELD**

Mailing Address P.O. BOX 2405

City	State	Zip Code
CHARLESTON	WV	25329-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATRIOT COALOccupation  
CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8975

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. BENNETT K. HATFIELD**

Mailing Address P.O. BOX 2405

City	State	Zip Code
CHARLESTON	WV	25329-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**PATRIOT COAL**

Occupation  
**CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.8976

Amount of Each Receipt this Period

1700.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**JEFREY T. JEZIERSKI**

Mailing Address 3101 N HAMPTON DR, UNIT 404

City	State	Zip Code
ALEXANDRIA	VA	22302-1521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**INFORMATION REQUESTED PER BEST EFF**

Occupation  
**INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 20 / 2016

Transaction ID : SA11.8935

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. JEFFERY KEFFER**

Mailing Address 42 TEMPLE ST  
137 FORT MAIRINE RD

City	State	Zip Code
ARLINGTON	MA	02476-6343

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**GEN POWER SERVICES, LLC**

Occupation  
**EXECUTIVE**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 23 / 2016

Transaction ID : SA11.8965

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4650.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**WAYMAN E. LIVELY**

Mailing Address 102 SWARTZ RD

City	State	Zip Code
KINGWOOD	WV	26537-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8963

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**CHRISTOPHER T. MARTENEY**

Mailing Address 128 CARMELLA DR

City	State	Zip Code
IRWIN	PA	15642-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLEVELAND BROTHERSOccupation  
REGIONAL SALES MANAGER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8955

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**MR. CLARK E. MCKEE**

Mailing Address 275 FLORIDA AVE

City	State	Zip Code
MORGANTOWN	WV	26501-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2016

Transaction ID : SA11.8895

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2015.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MR. CLARK E. MCKEE**

Mailing Address 275 FLORIDA AVE

City	State	Zip Code
MORGANTOWN	WV	26501-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11.8937

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**B. MR. CLARK E. MCKEE**

Mailing Address 275 FLORIDA AVE

City	State	Zip Code
MORGANTOWN	WV	26501-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9000

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**C. MR. DAVID H. MCKINLEY**

Mailing Address 10 KENWOOD PL

City	State	Zip Code
WHEELING	WV	26003-6004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCKINLEY CARTEROccupation  
EXECUTIVE

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11.8946

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1030.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

PAGE 15 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

 Full Name (Last, First, Middle Initial)  
**A. JOHN MENSORE**

Mailing Address 343 CLARK DR

City	State	Zip Code
NEW MARTINSVILLE	WV	26155-2103

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 NONE

 Occupation  
 RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8989

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**B. GEORGE PATTERSON, III**

Mailing Address 3 CHATWOOD ROAD

City	State	Zip Code
CHARLESTON	WV	25304-2764

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 INFORMATION REQUESTED PER BEST EFFC

 Occupation  
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8926

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**C. MR. JOSHUA ROGERS**

Mailing Address 620 HAYFIELD ST.

City	State	Zip Code
MORGANTOWN	WV	26508-4873

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 DINSMORE & SHOHL, LLP

 Occupation  
 ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8960

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 16 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEE SNYDER**  
 Mailing Address 279 LONE OAK RD

City State Zip Code  
 RANSON WV 25438-5614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SNYDER ENVIRONMENTAL

Occupation  
 CONTRACTOR

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2016

Transaction ID : SA11.9008

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. HENRY K. WILLARD II**  
 Mailing Address P.O. BOX 3269

City State Zip Code  
 SHEPHERDSTOWN WV 25443-3269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2016

Transaction ID : SA11.8971

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INSTANT GROWTH HYDROSEEDING LLC**  
 Mailing Address 140 VIP DR

City State Zip Code  
 MASONTOWN WV 26542-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2016

Transaction ID : SA11.9023

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 59

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MR. JASON C PEASLEE**

Mailing Address 140 VIP DR

City	State	Zip Code
MASONTOWN	WV	26542-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSTANT GROWTH HYDROSEEDING, LLCOccupation  
MANAGING MEMBER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9027

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. P&S REALTY MORGANTOWN LLC**

Mailing Address 2908 UNIVERSITY AVE

City	State	Zip Code
MORGANTOWN	WV	26505-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9024

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)  
**C. MR. PHIL MAUSER**

Mailing Address 1018 ELKINS DR

City	State	Zip Code
MORGANTOWN	WV	26505-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

P&amp;S REALTY

SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9025

Amount of Each Receipt this Period

250.00

☒ Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. SAUL RADMAN**

Mailing Address 429 LAKEVIEW MANOR

City

MORGANTOWN

State

WV

Zip Code

26508-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.9026

Amount of Each Receipt this Period

250.00

☒ Memo Item  
 CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

31195.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 59

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City State Zip Code  
BAKERSFIELD CA 93389-2667

FEC ID number of contributing  
federal political committee.

**C** C00420935

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 08 2016

Transaction ID : SA11.8911

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City State Zip Code  
BAKERSFIELD CA 93389-2667

FEC ID number of contributing  
federal political committee.

**C** C00420935

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 08 2016

Transaction ID : SA11.8912

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ACTION COMM. FOR RURAL ELECTRIFICATION**

Mailing Address 4301 WILSON BLVD

City State Zip Code  
ARLINGTON VA 22203-1867

FEC ID number of contributing  
federal political committee.

**C** C00002972

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 01 2016

Transaction ID : SA11.8894

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

9000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN ACADEMY OF OPHTHALMOLOGY PAC**

Mailing Address 1101 VERMONT AVE. NW, STE. 700

City

WASHINGTON

State

DC

Zip Code

20005-3526

FEC ID number of contributing federal political committee.

C C00196246

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11.8920

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF RHEUMATOLOGY(RHEUMPAC)**

Mailing Address 2200 LAKE BOULEVARD NE

City

ATLANTA

State

GA

Zip Code

30319-5310

FEC ID number of contributing federal political committee.

C C00432823

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11.8919

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF RHEUMATOLOGY(RHEUMPAC)**

Mailing Address 2200 LAKE BOULEVARD NE

City

ATLANTA

State

GA

Zip Code

30319-5310

FEC ID number of contributing federal political committee.

C C00432823

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11.8941

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COS PAC**

Mailing Address 1015 15TH ST NW

City	State	Zip Code
WASHINGTON	DC	20005-2605

FEC ID number of contributing  
federal political committee.

**C** C00010868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**03** / **31** / **2016**

Transaction ID : SA11.8966

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES PAC (AFGE PAC)**

Mailing Address 80 F STREET, NW

City	State	Zip Code
WASHINGTON	DC	20001-1528

FEC ID number of contributing  
federal political committee.

**C** C00009936

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

**02** / **15** / **2016**

Transaction ID : SA11.8892

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASOCIATION PAC**

Mailing Address 25 MASSACHUSETTS AVE NW, STE 600

City	State	Zip Code
WASHINGTON	DC	20001-7400

FEC ID number of contributing  
federal political committee.

**C** C00000422

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

**03** / **08** / **2016**

Transaction ID : SA11.8907

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LANE

City

SCHAUMBURG

State

IL

Zip Code

60173-4973

FEC ID number of contributing  
federal political committee.

**C** C00255752

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11.9007

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BASF CORPORATION EMPLOYEES PAC**

Mailing Address 100 PARK AVENUE

City

FLORHAM PARK

State

NJ

Zip Code

07932-1049

FEC ID number of contributing  
federal political committee.

**C** C00340075

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.8944

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BOMBARDIER PAC**

Mailing Address 2200 PENNSYLVANIA AVE NW, STE 660W

City

WASHINGTON

State

DC

Zip Code

20037-1750

FEC ID number of contributing  
federal political committee.

**C** C00546473

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11.8943

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 59

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**BUILD PAC**

Mailing Address 1201 15TH ST. NW

City	State	Zip Code
WASHINGTON	DC	20005-2899

FEC ID number of contributing  
federal political committee.**C** C00000901

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : SA11.8874

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**COALPAC**

Mailing Address 101 CONSTITUTION AVE NW, STE 500 E

City	State	Zip Code
WASHINGTON	DC	20001-2133

FEC ID number of contributing  
federal political committee.**C** C00109819

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8923

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name (Last, First, Middle Initial)  
**COLUMBIA PIPELINE GROUP PAC**Mailing Address 10 G STREET NE  
SUITE 400

City	State	Zip Code
WASHINGTON	DC	20002-4277

FEC ID number of contributing  
federal political committee.**C** C00575340

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8928

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 59

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CORNING INCORPORATED EMPLOYEES PAC**

Mailing Address 325 7TH STREET NW  
 SUITE 600

City	State	Zip Code
WASHINGTON	DC	20004-2805

FEC ID number of contributing  
federal political committee.

**C** C00033589

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

**Transaction ID : SA11.8932**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE. NW STE. 560

City	State	Zip Code
WASHINGTON	DC	20004-1745

FEC ID number of contributing  
federal political committee.

**C** C00163832

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

**Transaction ID : SA11.8914**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELECTRICAL CONTRACTORS PAC**

Mailing Address 3 BETHESDA METRO CTR

City	State	Zip Code
BETHESDA	MD	20814-5330

FEC ID number of contributing  
federal political committee.

**C** C00113811

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

**Transaction ID : SA11.8913**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>FIRSTENERGY PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 76 S MAIN ST		<b>Transaction ID : SA11.8979</b>	
City AKRON	State OH	Zip Code 44308-1812	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00140855		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer	Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HEARPAC OF HEARING INDUSTRIES ASSOCIATION</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 1444 I ST NW STE 700		<b>Transaction ID : SA11.8908</b>	
City WASHINGTON	State DC	Zip Code 20005-6542	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00437798		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>HEARPAC OF HEARING INDUSTRIES ASSOCIATION</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 1444 I ST NW STE 700		<b>Transaction ID : SA11.8969</b>	
City WASHINGTON	State DC	Zip Code 20005-6542	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00437798		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		3000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)  
**HOUSING PAC**

Mailing Address **1112 KING STREET**

City	State	Zip Code
ALEXANDRIA	VA	22314-2925

FEC ID number of contributing  
federal political committee.

**C** C00303818

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

**03** / **01** / **2016**

Transaction ID : SA11.8902

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**IBEW-INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS PAC**

Mailing Address **900 SEVENTH ST NW**

City	State	Zip Code
WASHINGTON	DC	20001-3886

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

**03** / **01** / **2016**

Transaction ID : SA11.8897

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**IBEW-INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS PAC**

Mailing Address **900 SEVENTH ST NW**

City	State	Zip Code
WASHINGTON	DC	20001-3886

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

**03** / **01** / **2016**

Transaction ID : SA11.8898

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. IBEW-INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS PAC**

Mailing Address 900 SEVENTH ST NW

City	State	Zip Code
WASHINGTON	DC	20001-3886

FEC ID number of contributing  
federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)Election Cycle-to-Date  
**10000.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

**Transaction ID : SA11.8899**

Amount of Each Receipt this Period

**2500.00**☐ Memo Item  
CONTRIBUTIONFull Name (Last, First, Middle Initial)  
**B. INTERNATIONAL ORGANIZATION OF MASTERS MATES & PILOTS PAC**

Mailing Address 700 MARITIME BLVD. STE. B

City	State	Zip Code
LINTHICUM	MD	21090-1953

FEC ID number of contributing  
federal political committee. **C C00073056**

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)Election Cycle-to-Date  
**3000.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

**Transaction ID : SA11.8900**

Amount of Each Receipt this Period

**1000.00**☐ Memo Item  
CONTRIBUTIONFull Name (Last, First, Middle Initial)  
**C. IRONWORKERS PAC**

Mailing Address 1750 NEW YORK AVE NW

City	State	Zip Code
WASHINGTON	DC	20006-5305

FEC ID number of contributing  
federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)Election Cycle-to-Date  
**10000.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

**Transaction ID : SA11.8893**

Amount of Each Receipt this Period

**5000.00**☐ Memo Item  
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**8500.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**IRONWORKERS PAC**

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON	State DC	Zip Code 20006-5305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11.8922

Amount of Each Receipt this Period

5000.00
---------

☐ Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DR, STE 100

City ARLINGTON	State VA	Zip Code 22202-3706
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11.8938

Amount of Each Receipt this Period

1000.00
---------

☐ Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MACHINISTS NON-PARTISAN POLITICAL LEAGUE PAC**

Mailing Address 9000 MACHINISTS PL.

City UPPER MARLBORO	State MD	Zip Code 20772-2675
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2016

Transaction ID : SA11.8891

Amount of Each Receipt this Period

5000.00
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☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11000.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City

BAKERSFIELD

State

CA

Zip Code

93389-0134

FEC ID number of contributing federal political committee.

C C00428052

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : SA11.8905

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City

BAKERSFIELD

State

CA

Zip Code

93389-0134

FEC ID number of contributing federal political committee.

C C00428052

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : SA11.8906

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MARINE ENGINEERS BENEFICIAL ASSN PAC**

Mailing Address 444 N. CAPITOL ST. NW, STE. 800

City

WASHINGTON

State

DC

Zip Code

20001-1508

FEC ID number of contributing federal political committee.

C C00279380

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2016

Transaction ID : SA11.8901

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

11000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MYLAN INC PAC**

Mailing Address 700 6TH STREET, NW, SUITE 525

City State Zip Code  
WASHINGTON DC 20001-5537

FEC ID number of contributing federal political committee. **C** C00332395

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 22 2016

Transaction ID : SA11.8915

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City State Zip Code  
WASHINGTON DC 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 22 2016

Transaction ID : SA11.8916

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City State Zip Code  
WASHINGTON DC 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2016

Transaction ID : SA11.8982

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL LETTER CARRIERS ASSOC PAC**

Mailing Address 1630 DUKE ST FL 2

City State Zip Code  
ALEXANDRIA VA 22314-3467

FEC ID number of contributing  
federal political committee.

**C** C00072025

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 22 2016

**Transaction ID : SA11.8917**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL WATER ASSOCIATION (WATER PAC)**

Mailing Address 2915 SOUTH 13TH

City State Zip Code  
DUNCAN OK 73533-9086

FEC ID number of contributing  
federal political committee.

**C** C00202184

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 28 2016

**Transaction ID : SA11.8929**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSOCIATION RURAL BR**

Mailing Address 4121 WILSON BLVD.  
10TH FLOOR

City State Zip Code  
ARLINGTON VA 22203-1839

FEC ID number of contributing  
federal political committee.

**C** C00004473

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 28 2016

**Transaction ID : SA11.8931**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**
**A.** Full Name (Last, First, Middle Initial)  
**NELSON MULLINS RILEY & SCARBOROUGH FEDERAL PAC**

Mailing Address 1320 MAIN STREET, 17TH FLOOR

City	State	Zip Code
COLUMBIA	SC	29201-3268

FEC ID number of contributing federal political committee.

C C00278895

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11.8930

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NEWFIELD PAC**
Mailing Address 4 WATERWAY SQUARE PLACE  
SUITE 100

City	State	Zip Code
THE WOODLANDS	TX	77380-2764

FEC ID number of contributing federal political committee.

C C00443523

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11.8970

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ORBITAL ATK INC PAC**

Mailing Address 1300 WILSON BLVD STE 400

City	State	Zip Code
ARLINGTON	VA	22209-2330

FEC ID number of contributing federal political committee.

C C00250209

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11.8927

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**PAC - NATIONAL ASSOCIATION OF LETTER CARRIERS**

Mailing Address 100 INDIANA AVE., N. W.

City  
WASHINGTON

State  
DC

Zip Code  
20001-2144

FEC ID number of contributing  
federal political committee.

**C** C00023580

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 22 / 2016

**Transaction ID : SA11.8918**

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PAC - SEAFARERS**

Mailing Address 5201 AUTH WAY

City  
CAMP SPRINGS

State  
MD

Zip Code  
20746-4211

FEC ID number of contributing  
federal political committee.

**C** C00004325

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.8939**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PAC - SEAFARERS**

Mailing Address 5201 AUTH WAY

City  
CAMP SPRINGS

State  
MD

Zip Code  
20746-4211

FEC ID number of contributing  
federal political committee.

**C** C00004325

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2016

**Transaction ID : SA11.8940**

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

 Full Name (Last, First, Middle Initial)  
**A. PG&E CORPORATION ENERGYPAC**

Mailing Address 77 BEALE ST, MAIL CODE B29H

City	State	Zip Code
SAN FRANCISCO	CA	94105-1814

FEC ID number of contributing federal political committee.

C C00177469

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11.8968

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**B. REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611-4011

FEC ID number of contributing federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11.8924

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
 CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**C. RENAL PHYSICIANS ASSOCIATION PAC (RPAPAC)**

Mailing Address 1700 ROCKVILLE PIKE STE. 220

City	State	Zip Code
ROCKVILLE	MD	20852-1631

FEC ID number of contributing federal political committee.

C C00409391

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : SA11.8909

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**RESOLUTE FOREST PRODUCTS PAC**

Mailing Address 3502 REGENTS PARK COURT

City

ARLINGTON

State

TX

Zip Code

76017-4695

FEC ID number of contributing  
federal political committee.
☐ C00350884

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

☐ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : SA11.8910

Amount of Each Receipt this Period

☐ 1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SIEMENS CORPORATION PAC**Mailing Address 300 NEW JERSEY AVENUE, NW  
SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20001-2268

FEC ID number of contributing  
federal political committee.
☐ C00353797

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

☐ 2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11.8921

Amount of Each Receipt this Period

☐ 1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SOUTHWESTERN ENERGY COMPANY PAC**Mailing Address 4100 CORPORATE CENTER DRIVE  
SUITE 330

City

SPRINGDALE

State

AR

Zip Code

72762-5771

FEC ID number of contributing  
federal political committee.
☐ C00190652

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

☐ 1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11.8945

Amount of Each Receipt this Period

☐ 1500.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**THE WILLIAMS COMPANIES, INC. PAC**

Mailing Address 1627 I ST NW STE 900

City  
 WASHINGTON

State  
 DC

Zip Code  
 20006-4057

FEC ID number of contributing  
 federal political committee.

**C** C00040394

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

Transaction ID : SA11.8925

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD ST. NW, 9TH FLOOR

City  
 WASHINGTON

State  
 DC

Zip Code  
 20001-2790

FEC ID number of contributing  
 federal political committee.

**C** C00008268

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2016

Transaction ID : SA11.8888

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TRANSPORTATION TRADES DEPT., AFL-CIO PAC**Mailing Address 815 16TH ST NW  
4TH FLOOR

City  
 WASHINGTON

State  
 DC

Zip Code  
 20006-4101

FEC ID number of contributing  
 federal political committee.

**C** C00280909

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

Transaction ID : SA11.8896

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress****A.** Full Name (Last, First, Middle Initial)  
**TREASURY EMPLOYEES PAC**

Mailing Address 1750 H ST NW

City	State	Zip Code
WASHINGTON	DC	20006-4600

FEC ID number of contributing  
federal political committee.**C** C00107128

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

**Transaction ID : SA11.8942**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
**CONTRIBUTION**
**B.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP PAC**

Mailing Address P.O. BOX 11586

City	State	Zip Code
WASHINGTON	DC	20008-0786

FEC ID number of contributing  
federal political committee.**C** C00433060

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

**Transaction ID : SA11.8967**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
**CONTRIBUTION**
**C.** Full Name (Last, First, Middle Initial)  
**UNITED ASSOCIATION OF JOURNEYMEN AND APPRENTICES OF THE PLUM**

Mailing Address THREE PARK PLACE

City	State	Zip Code
ANNAPOLIS	MD	21401-

FEC ID number of contributing  
federal political committee.**C** C00320218

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2016

**Transaction ID : SA11.8904**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
**CONTRIBUTION**
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

8500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**UNITED MINE WORKERS OF AMERICA PAC**

A.

Mailing Address 18354 QUANTICO GATEWAY DR.  
 STE. 200

City	State	Zip Code
TRIANGLE	VA	22172-1779

FEC ID number of contributing  
federal political committee.

**C** C00013342

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11.8889

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

117000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. MR. TYLER HENRY**

Mailing Address 22302 KOEHLER DR

City	State	Zip Code
MORGANTOWN	WV	26508

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

100.00
--------

☐ Memo Item

Transaction ID : SB17.I1684

**B. MR. TYLER HENRY**

Mailing Address 22302 KOEHLER DR

City	State	Zip Code
MORGANTOWN	WV	26508

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

100.00
--------

☐ Memo Item

Transaction ID : SB17.I1700

**C. MR. TYLER HENRY**

Mailing Address 22302 KOEHLER DR

City	State	Zip Code
MORGANTOWN	WV	26508

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2016

Amount of Each Disbursement this Period

100.00
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☐ Memo Item

Transaction ID : SB17.I1715

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

300.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

4000.00
---------

☐ Memo Item

Transaction ID : SB17.I1682

**B. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

239.78
--------

☐ Memo Item

Transaction ID : SB17.I1686

**C. OFFICE MAX**

Mailing Address 263 SHUMAN BLVD

City	State	Zip Code
NAPERVILLE	IL	60563

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

32.59
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☒ Memo Item

Transaction ID : SB17.I1688

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4239.78



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 2501 CHAPLINE ST

City	State	Zip Code
WHEELING	WV	26003

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

207.19
--------

☒ Memo Item

Transaction ID : SB17.I1687

**B. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

4000.00
---------

☐ Memo Item

Transaction ID : SB17.I1699

**C. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2016

Amount of Each Disbursement this Period

4000.00
---------

☐ Memo Item

Transaction ID : SB17.I1714

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8000.00
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial) <b>A. THOMAS MIDANEK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 5000 HAMPTON CENTER, STE 3			
City MORGANTOWN	State WV	Zip Code 26505	Amount of Each Disbursement this Period 182.50
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1689
State: District:			
Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 208 S AKARD ST			
City DALLAS	State TX	Zip Code 75202	Amount of Each Disbursement this Period 55.50
Purpose of Disbursement TELEPHONE		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1691
State: District:			
Full Name (Last, First, Middle Initial) <b>C. NATION BUILDER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016	
Mailing Address 448 S HILL ST, STE 200			
City LOS ANGELES	State CA	Zip Code 90013	Amount of Each Disbursement this Period 127.00
Purpose of Disbursement DATABASE MANAGEMENT		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1690
State: District:			
SUBTOTAL of Disbursements This Page (optional).....		182.50	
TOTAL This Period (last page this line number only).....			

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial) <b>A. THOMAS MIDANEK</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016	
Mailing Address 5000 HAMPTON CENTER, STE 3		Amount of Each Disbursement this Period 182.50	
City MORGANTOWN	State WV	Zip Code 26505	Category/ Type
Purpose of Disbursement SEE MEMO ENTRIES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Transaction ID : SB17.I1706	
Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016	
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 55.50	
City DALLAS	State TX	Zip Code 75202	Category/ Type
Purpose of Disbursement TELEPHONE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Transaction ID : SB17.I1708	
Full Name (Last, First, Middle Initial) <b>C. NATION BUILDER</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016	
Mailing Address 448 S HILL ST, STE 200		Amount of Each Disbursement this Period 127.00	
City LOS ANGELES	State CA	Zip Code 90013	Category/ Type
Purpose of Disbursement DATABASE MANAGEMENT			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Transaction ID : SB17.I1707	
SUBTOTAL of Disbursements This Page (optional).....		182.50	
TOTAL This Period (last page this line number only).....			

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial) <b>A. THOMAS MIDANEK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 5000 HAMPTON CENTER, STE 3		Amount of Each Disbursement this Period 182.50	
City MORGANTOWN	State WV	Zip Code 26505	Category/ Type
Purpose of Disbursement SEE MEMO ENTRIES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Transaction ID : SB17.I1710		
Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 55.50	
City DALLAS	State TX	Zip Code 75202	Category/ Type
Purpose of Disbursement TELEPHONE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Transaction ID : SB17.I1711		
Full Name (Last, First, Middle Initial) <b>C. NATION BUILDER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 448 S HILL ST, STE 200		Amount of Each Disbursement this Period 127.00	
City LOS ANGELES	State CA	Zip Code 90013	Category/ Type
Purpose of Disbursement DATABASE MANAGEMENT			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Transaction ID : SB17.I1712		
SUBTOTAL of Disbursements This Page (optional).....		182.50	
TOTAL This Period (last page this line number only).....			

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 300 S WASHINGTON ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

20.00
-------

☐ Memo Item

Transaction ID : SB17.I1696

**B. BB&T**

Mailing Address 300 S WASHINGTON ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

20.00
-------

☐ Memo Item

Transaction ID : SB17.I1709

**C. BB&T**

Mailing Address 300 S WASHINGTON ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

20.00
-------

☐ Memo Item

Transaction ID : SB17.I1728

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

60.00
-------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

2866.94
---------

☐ Memo Item

Transaction ID : SB17.I1703

**B. CAROLE GOEAS & ASSOCIATES**

Mailing Address 1707 PRINCE ST #5

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

6623.81
---------

☐ Memo Item

Transaction ID : SB17.I1693

**C. CAROLE GOEAS & ASSOCIATES**

Mailing Address 1707 PRINCE ST #5

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

2493.00
---------

☐ Memo Item

Transaction ID : SB17.I1705

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11983.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. CAROLE GOEAS & ASSOCIATES**

Mailing Address 1707 PRINCE ST #5

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

City	State	Zip Code
ALEXANDRIA	VA	22314

Amount of Each Disbursement this Period

2475.20
---------

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17.I1717

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD, STE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

4800.00
---------

Purpose of Disbursement  
SOFTWARECategory/  
Type☐ Memo Item

Candidate Name

Transaction ID : SB17.I1685

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL SYSTEMS, INC.**

Mailing Address 12450 AUTOMOBILE BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2016

City	State	Zip Code
CLEARWATER	FL	33762

Amount of Each Disbursement this Period

1170.00
---------

Purpose of Disbursement  
POSTAGECategory/  
Type☐ Memo Item

Candidate Name

Transaction ID : SB17.I1716

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8445.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL SYSTEMS, INC.**

Mailing Address 12450 AUTOMOBILE BLVD

City	State	Zip Code
CLEARWATER	FL	33762

Purpose of Disbursement  
PRINTING

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2016

Amount of Each Disbursement this Period

2528.54

☐ Memo Item

Transaction ID : SB17.I1718

**B. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
SEE MEMO ENTRIESCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2016

Amount of Each Disbursement this Period

5508.74

☐ Memo Item

Transaction ID : SB17.I1694

**C. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
CAMPAIGN STRATEGYCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 21 / 2016

Amount of Each Disbursement this Period

5500.00

☒ Memo Item

Transaction ID : SB17.I1695

**SUBTOTAL** of Disbursements This Page (optional).....

8037.28

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
CAMPAIGN STRATEGY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 19 / 2016

Amount of Each Disbursement this Period

5500.00
---------

☐ Memo Item

Transaction ID : SB17.I1704

**B. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
CAMPAIGN STRATEGY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2016

Amount of Each Disbursement this Period

5500.00
---------

☐ Memo Item

Transaction ID : SB17.I1719

**C. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 03 / 2016

Amount of Each Disbursement this Period

9.57
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☐ Memo Item

Transaction ID : SB17.I1702

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

11009.57

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2016

Amount of Each Disbursement this Period

9.57
------

☐ Memo Item

Transaction ID : SB17.I1722

**B. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

101.45
--------

☐ Memo Item

Transaction ID : SB17.I1723

**C. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

41.65
-------

☐ Memo Item

Transaction ID : SB17.I1725

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

152.67

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

30.00
-------

☐ Memo Item

Transaction ID : SB17.I1697

**B. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

30.00
-------

☐ Memo Item

Transaction ID : SB17.I1698

**C. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

30.00
-------

☐ Memo Item

Transaction ID : SB17.I1713

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

90.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES, INC.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City	State	Zip Code
ATHENS	GA	30605

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

4541.25
---------

☐ Memo Item

Transaction ID : SB17.I1683

**B. PROFESSIONAL DATA SERVICES, INC.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City	State	Zip Code
ATHENS	GA	30605

Purpose of Disbursement  
COMPLIANCE SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

3194.47
---------

☐ Memo Item

Transaction ID : SB17.I1720

**C. WEST VIRGINIA SECRETARY OF STATE**Mailing Address 1900 KANAWHA BLVD E  
BLDG 1, STE 157-K

City	State	Zip Code
CHARLESTON	WV	25305

Purpose of Disbursement  
CANDIDATE FILING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

1740.00
---------

☐ Memo Item

Transaction ID : SB17.I1692

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9475.72

62341.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 59

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMIT**

Mailing Address 320 FIRST ST SE

Date of Disbursement

M M	D D	Y Y Y Y
03	29	2016

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION

35000.00
----------

Candidate Name

☐ Memo Item

Transaction ID : SB21.I1724

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF COLE**

Mailing Address PO BOX 1481

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2016

City	State	Zip Code
CHARLESTON	WV	25339

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION

1000.00
---------

Candidate Name

☐ Memo Item

Transaction ID : SB21.I1721

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Category/  
Type**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

36000.00

36000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 54 OF 59

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : LS10311.C1095

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

100000.00

Cumulative Payment To Date

85000.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
03 / 31 / 2010

Date Due

M M / D D / Y Y  
On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 55 OF 59

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : Ls10311.C1097

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
04 / 21 / 2010

Date Due

M M / D D / Y Y  
On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 56 OF 59

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : LS10311.C1098

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 30 / 2010

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 57 OF 59

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : LS10311.C1100

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
23 Stamm Ln

City	State	ZIP Code
Wheeling	WV	26003-5542

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	100000.00	50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2010

Date Due

M M / D D / Y Y Y Y  
On Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : LS10311.C1101

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
23 Stamm Ln

City	State	ZIP Code
Wheeling	WV	26003-5542

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="150000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="150000.00"/>

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>	<input type="text" value="On Demand"/>	<input type="text" value="0.00"/> % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>

**SUBTOTALS** This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 59 OF 59

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : LS10311.C1103

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

David McKinley

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
23 Stamm Ln

City	State	ZIP Code
Wheeling	WV	26003-5542

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="50000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="50000.00"/>

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>	<input type="text" value="On Demand"/>	<input type="text" value="0.00"/> % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>

SUBTOTALS This Period This Page (optional)..... ►

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.